



Community Development

Building | Code Enforcement | Planning | Zoning

Application for Vacating a Plat or Right(s)-of-Way

The following information is required for submission of an application for vacating a plat of record or rights-of-way located within the City of Lake Alfred, Florida. **Please print or type the required information below. Applications may be submitted electronically via email, however one (1) original signed application with attachments is required.**

Applicant

Name of Property Owner(s): _____

Mailing Address: _____ Phone: _____

Name of Agent, if applicable: _____

Mailing Address: _____ Phone: _____

Property Identification

Property Address or General Location: _____

Present Use of the Property: _____

Existing Structures Located on the Site: _____

Total Acreage: _____ Number of Residents on Site: _____

Parcel I.D.#: _____

Legal Description of the Property: _____

Required Elements of the Petition for Vacation of a Plat (Section 07.06.08.01)

Proof of Publication of Notice of Intent: _____

Certificate of Title: _____

Statement of Taxes and Resolution: _____

City Use Only:

Date Received: _____ Received By: _____ Fee Paid: _____

Questions Pertaining to Vacation (attach separate sheet as needed)

1) Describe the location of the plat and/or right-of-way to be abandoned. (Attach a Property Appraiser map showing the location of the plat or the location of the right-of-way in relation to abutting properties. Attach a survey for plat vacations.)

2) What is the purpose for requesting the abandonment of the subject plat and/or right-of-way?

3) Identify the owners and parcel numbers of all properties abutting the affected right-of-way. Identify any agreements that have been made regarding the ownership of the property if the right-of-way is vacated.

4) Identify all known utilities located within the right-of-way: Electric, Cable TV, Telephone, Water, Sewer, and Drainage: (Note: to protect and access affected utilities, an easement will be required across all or part of the right-of-way.)

5) Will any existing utilities need to be relocated? If so, who will pay for relocation costs?

6) Would the abandonment affect access to other properties; e.g., access by emergency vehicles, sanitation pick-up, etc.?

7) Other comments:

OWNER'S SIGNATURE PAGE

(I) (We), _____ being duly sworn, depose and say that (I) (we) own one or more of the properties involved in this petition and that (I) (we) authorize the City of Lake Alfred to process this petition for Zoning or Re-zoning, in accordance with all adopted City rules and regulations, and in conformance with State law.

Further, the undersigned (has) (have) appointed and (does) (do) appoint _____ as agent(s) to execute any petitions or other documents necessary to affect such petition; and request that you accept the signature of my agent(s) as representing my agreement of all terms and conditions of the approval process:

Further, (I) (we) or any agent or lessee of the subject property authorized by (me) (us) to file this petition, deposes and say that the statements and answers contained in the application and any information attached thereto, present the arguments in behalf of this petition to the best of (my) (our) ability; and that the statements and information referred to above are in all respects true and correct to the best of (my) (our) knowledge and belief.

OWNERS

_____/_____
Owner's Signature/Print Title

_____/_____
Owner's Signature/Print Title

Printed Name of Owner

Printed Name of Owner

OWNER'S NOTARIZATION

STATE OF FLORIDA
COUNTY OF _____.

The foregoing instrument was acknowledged before me this ___ day of _____, 20___, by _____, who is personally known to me or who has produced _____ as identification.

Notary Public
Notarial Seal and Commission
Expiration Date

AGENT OR LESSEE SIGNATURE PAGE

(I) _____ (We),
_____ being
duly sworn, that (I) (we) serve as (agent or lessee) for the owner(s) in
making this petition and that the owner(s) (has) (have) authorized (me) (us) to act in this
capacity.

Further, (I) (we) depose and say that the statements and answers herein contained and
other information attached hereto present the arguments on behalf of the petition herein
requested to the best of (my) (our) ability and that the statements and information above
belief.

AGENT OR LESSEE SIGNATURE

Agent or Lessee's Signature/Print Title

agent or Lessee's Signature/Print Title

Printed Name of Agent or Lessee

Printed Name of Agent or Lessee

Company's Name

Company's Name

Company's Address

Company's Address

AGENT OR LESSEE(S) NOTARIZATION

STATE OF FLORIDA
COUNTY OF _____.

The foregoing instrument was acknowledged before me this ___ day of
_____, 20___, by _____,
who is personally known to me or who has produced _____ as
identification.

Notary Public
Notarial Seal and Commission
Expiration Date